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|           |                      |         | .01.001105 | Application Number     |           |  |
| INFC      | PRMATION             | I DIE   | SCLOSURE   | Filing Date            |           |  |
| STA       | TEMENT B             | 3Y A    | PPLICANT   | First Named Inventor   | HeBen Liu |  |
| •         |                      |         |            | Art Unit               |           |  |
|           | (use as many she     | 9ets as | necessary) | Examiner Name          |           |  |
| Sheet     | 1                    | of      | 1          | Attorney Docket Number |           |  |

| U.S. PATENT DOCUMENTS |  |                                                            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                 |  |
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| Examiner<br>Initials  |  | Document Number  Number - Kind Code <sup>2</sup> (if known | Publication Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Pages, Columns, Lines, Where<br>Relevant Passeges or Relevant<br>Figures Appear |  |
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|------------------------------|-------|---|----------------------------|-----------------------------|------------------------------------|---------------------------------------|--------|
| Examiner Cit<br>Initials* No |       |   | -Number - Kind Code & gran | Publication Date MM-DD-YYYY | Name of Pate<br>Applicant of Cited |                                       | ssages |
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| Examiner  | Date       |
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| Signature | Considered |
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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English Implication Terrisoloci Institute Section 2 of hours to complete. Three will vary depending upon the needed of the individual case. And prominents on the amount of the syst var engulered to complete his form should be sent to line Cher Information Officer, U.S. Patent raid. And prominents on the amount of the syst var engulered to complete his form should be sent to ince Cher Information Officer, U.S. Patent raid. Trademark Office, Washington, O.2 2023.1. On NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, D.C 2023.1.